PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10827330

									10 7	_0	- / 5	20	
CLAIMS AS FILED - PART I (Column 1) (Column 2)									NTITY		ОТН	R THAN	
TOTAL CLAIMS			1/1/	10		(Column 2)				OR		L ENTITY	
FOR			NUMBE	NUMBER FILED		BER EXTRA	BASIC		FEE 385.00	,	BASIC FE		
TOTAL CHARGEABLE CLAIMS				(/) minus 20= *		- CATEATA	-		303.00	JOH	 	 	
INDEPENDENT CLAIMS			7 minus 3 = -				XS	9=		OR	X\$18=		
MULTIPLE DEPENDENT CLAIM PE						r-,	X43	3=		OR	X86=		
L							+14	5=		OR	+290=	1	
* If the difference in column 1 is less than zero, enter "0" in						column 2	TOT	AL		OR	TOTAL	170	
CLAIMS AS AMENDED - PART II								OTHER THAN					
_	_	(Column 1)		(Colum		(Column 3)	SMA	LLE	NTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOU PAID FO	ER JSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Ş	Total	•	Minus	**		=	X\$ 9	=		OR	X\$18=		
AME	Independent	*	Minus	***			X43:			OR	X86=		
L_	FIRST PHESI	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM		+145			1	+290=		
								AL		OR	TOTAL		
							ADDIT. F	EE L		OR A	DDIT. FEE		
		(Column 1)		(Column	2)	(Column 3)					•		
AMENDMENT B	1	CLAIMS REMAINING		HIGHES					ADDI-	Г		ADDI-	
		AFTER		PREVIOU		PRESENT EXTRA	RATE		IONAL		RATE	TIONAL	
		AMENDMENT	ز	PAID FC		CATTA			FEE			FEE	
	Total	•	Minus	**		=	X\$ 9=			OR	X\$18=		
AME	Independent	NETATION OF ME	Minus	***		=	X43=			OR	X86=		
	FINST PRESE	NTATION OF ML	JUIPLE DE	PENDENT	LAIM		+145=	T		OR	+290=		
							TOTA ADDIT. FE		•	ل ن OR	TOTAL		
		(Column 1)		(Column	2)	(Column 3)	70011.12				DD11.1 EE	·	
IMEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBER PREVIOUS PAID FOI	R SLY	PRESENT EXTRA	RATE	TI	ADDI- ONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=	1		OR	X\$18=		
	Independent		Minus	***	- 1	=	X43=	╁		~~}-	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							╂	I°	OR L	700=		
	If the entry in column 1 is less than the								d	OR .	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***OTAL ADDIT. FEE													
T	he "Highest Numb	per Previously Paid	For (Total or	SPACE is les Independent)	ss than is the h	3, enter "3," ighest number fo			riate box i				